

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE 2008 JUL 18 AM 11:02

IA ETHICS AND
CAMPAIGN DISCLOSURE
pm lley

COMMITTEE NAME (Must be same as on Statement of Organization)

KETTERING CAMPAIGN

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

STEVE KETTERING

Political Party (if applicable)

REPUBLICAN

Office Sought

SENATOR

District (if Senate or House)

26

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged in

Scanned

Computer

Audited

3 pages

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

SIGNATURE OF PERSON FILING REPORT

712-657-3347

TELEPHONE

July 15, 2008

DATE SIGNED

I AM FILING A activity of 5-15-08 thru 7-14-08 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 18,130.88

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

5,000.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 23,130.88

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 23,130.88

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

50.00

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

KETTERING CAMPAIGN

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/22/08	ID# CK# 1285	Sac County Republican Party 1854 - 280th Street Odebolt, IA 51458		\$ 250.00	<input type="checkbox"/>
06/18/08	ID# 6052 CK# 3252	Independent Insurance Agents of IA 4000 Westown Pkwy., Ste 200 West Des Moines, IA 50265		500.00	<input checked="" type="checkbox"/>
6/18/08	ID# CK# 3457	Susan K. Cameron 600 Brentwood Dr. Waukee, IA 50263		200.00	<input checked="" type="checkbox"/>
6/18/08	ID# 6430 CK# 1577	Iowa Rural Water State PAC 4221 S. 22nd Ave E. Newton, IA 50208		100.00	<input checked="" type="checkbox"/>
6/18/08	ID# 6056 CK# 3710	Bankers United in Legislative 8800 NW 62nd Avenue Johnston, IA 50131-6200		2500.00	<input checked="" type="checkbox"/>
6/18/08	ID# 8251 CK# 1985	PrinPac 711 High Street Des Moines, IA 50392		250.00	<input checked="" type="checkbox"/>
6/18/08	ID# 6073 CK# 1136	Iowa Medical PAC 1001 Grand Avenue West Des Moines, IA 50265-3502		500.00	<input checked="" type="checkbox"/>
6/21/08	ID# 8061 CK# 7656	Citigroup Inc 1101 Pennsylvania Ave NW, Ste 1000 Washington, D.C. 20004		250.00	<input type="checkbox"/>
7/11/08	ID# 6498 CK# 1739	WellPac 636 Grand Avenue, Station 13 Des Moines, IA 50309		250.00	<input type="checkbox"/>
7/11/08	ID# 6486 CK# 1707	Iowa Telecom PAC 115 S. 2nd Ave West Newton, IA 50208		200.00	<input type="checkbox"/>
SUB-TOTAL				\$5000.00	
TOTAL (if last page of this schedule)				\$5000.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

KETTERING CAMPAIGN

Reset Form

SCHEDULE
E
(Rev. 06/97)

IN-KIND
CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
6/18/08	Iowa Industry PAC 904 Walnut Street, Suite 100 Des Moines, IA 50309-3503		Invitations & Catering	\$ 50.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 50.00

TOTAL (if last
page of this
schedule) \$ 50.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)